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# Weekly Bulletin

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GUY P. JONES
EDITOR

## Infectious Jaundice a Reportable Disease.

The California State Board of Health, at its regular meeting held in Sacramento July 1st, declared infectious jaundice a reportable disease in California. Physicians and health officers are urged to watch carefully for any cases of this disease that may occur and to report same promptly in accordance with the provisions of the law. This disease has been quite prevalent recently in the State of New York and at least two outbreaks of infectious jaundice have occurred recently in California.

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## Low Infant Mortality in California Cities.

Once again California cities have made the best records in low infant mortality rates. In the statistical report of infant mortality for 1921 in 573 cities of the United States, the American Child Hygiene Association gives San Francisco next to the best infant mortality record in cities having populations over 250,000. Oakland made the best record of any city among those having populations of 100,000 to 250,000. Long Beach, Cal., and Rockford, Illinois, share the honors in having the lowest infant mortality rate among cities of 50,000 to 100,000. Pasadena has the lowest rate for cities having populations of 25,000 to 50,000, and Santa Cruz is second in the group of cities having populations of 10,000 to 25,000. The cities having the lowest and the highest infant mortality rate are the following:

| | |
|---|---|
| **Population Over 250,000.** | |
| Lowest | |
| Portland, Ore | 48 |
| San Francisco, Cal. | 51 |
| Seattle, Wash. | 52 |
| Highest | |
| Pittsburg, Pa. | 96 |
| Kansas City, Mo. | 94 |
| Buffalo, N. Y. | 93 |
| **Population 100,000-250,000.** | |
| Lowest | |
| Oakland, Cal. | 52 |
| St. Paul, Minn. | 54 |
| Spokane, Wash. | 55 |
| Highest | |
| Memphis, Tenn. | 118 |
| Fall River, Mass. | 113 |
| Scranton, Pa. | 104 |
| **Population 50,000-100,000.** | |
| Lowest | |
| Long Beach, Cal. | 54 |
| Rockford, Ill. | 54 |
| Covington, Ky. | 57 |
| Highest | |
| Charleston, S. C. | 158 |
| Savannah, Ga. | 140 |
| Knoxville, Tenn. | 109 |
| **Population 25,000-50,000.** | |
| Lowest | |
| Pasadena, Cal. | 31 |
| Brookline, Mass. | 41 |
| Moline, Ill. | 45 |
| Highest | |
| Petersburg, Va. | 153 |
| Columbia, S. C. | 144 |
| Pueblo, Colo. | 130 |
| **Population 10,000-25,000.** | |
| Lowest | |
| East Hartford, Conn. | 24 |
| Santa Cruz, Cal. | 33 |
| Tonawanda, N. Y. | 37 |
| Highest | |
| Dunsmore, Pa. | 186 |
| Lincoln, Ill. | 166 |
| Kewanee, Ill. | 164 |

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**Education is not more important than good health. The higher the civilization, the greater the number of badly nourished.—W. R. P. Emerson, M.D.**

## Program for Institute for Public Health Nurses.

An institute for public health nurses will be held in Berkeley July 24 to August 5 under the auspices of the State Board of Health and the University of California Summer Session. The course is given to fifty nurses because of the necessity for limiting the number who may take the field exercises. Those who are not permitted to enroll for the field work may attend the lectures as auditors, but they are not considered as in attendance at the institute and can not receive a certificate.

For the field work the class will be divided into groups of six and a rotation schedule will be so arranged that the following exercises will be covered under supervision during eight mornings:

Field exercise I—Office of the public health nursing unit.

Field exercise II—District visiting.

Field exercise III—Dental Clinic.

Field exercise IV—Well Baby Clinic.

Field exercise V—Tuberculosis Clinic.

Field exercise VI—Mental Clinic.

Field exercise VII—Venereal Disease Clinic.

Field exercise VIII—Skin Disease Clinic.

All lectures will be held in the lecture room, Hygiene Pathology Building, University of California.

**Monday, July 24.**

9 a.m. to 12 m.
Registration 9-11, Lecture Room, Hygiene Pathology Building, University of California.
Assignment to sections for field work 11-12 in same room.

1 p.m. **The Prevention of Heart Disease.**
Dr. Haven Emerson, Professor of Public Health Administration, Columbia University, New York.

2 p.m. **General Aspects of Public Health Nursing.**
Miss Mary L. Cole, Director, Public Health Nursing, Pacific Division, American Red Cross, San Francisco.

3 p.m. **Function of the Public Health Nurse in the U. S. Public Health Service.**
Senior Surgeon J. C. Perry, U. S. Public Health Service, San Francisco.

4 p.m. **History of the Control of Smallpox.**
Dr. J. N. Force, Associate Professor of Epidemiology, University of California, Berkeley.

**Tuesday, July 25.**

9 a.m. to 12 m.
Field exercise according to assignment.

1 p.m. **General Aspects of Tuberculosis.**
Dr. R. A. Peers, Member, State Board of Health, Colfax.

2 p.m. **Community Organization.**
Miss Margaret Wales, Director, Social Service Department, Lane Hospital, San Francisco.

3 p.m. **The Management of the Health Office in Smaller Community.**
Mr. Louis Olsen, Health Officer, Palo Alto.

4 p.m. **Differential Diagnosis Between Smallpox and Chickenpox.**
Dr. A. F. Gillihan, District Health Officer, State Board of Health, Sacramento.

**Wednesday, July 26.**

9 a.m. to 12 m.
Field exercise according to assignment.

1 p.m. **Dental Hygiene.**
Dr. Guy S. Millberry, Dean, College of Dentistry, University of California, San Francisco.

2 p.m. **Family Case Work.**
Miss Edith S. Bryan, Assistant Professor of Public Health Nursing, University of California, Berkeley.

3 p.m. **The Epidemiology and Control of Rabies in California.**
Dr. W. H. Kellogg, Director, State Hygiene Laboratory, State Board of Health, Berkeley.

4 p.m. **Epidemiology of Smallpox.**
Dr. A. F. Gillihan.

**Thursday, July 27.**

9 a.m. to 12 m.
Field exercise according to assignment.

1 p.m. **The Rollier Treatment in Tuberculosis.**
Dr. Esther Rosencrantz, San Francisco, Assistant Attending Physician, San Francisco Hospital, in charge of Tuberculosis, University of California Service; Instructor in Medicine, University of California Medical School.

2-4 p.m. **Vital Statistics for the Public Health Nurse.**
Dr. A. F. Gillihan.

4 p.m. **Smallpox Vaccination.**
Dr. J. N. Force.

**Friday, July 28.**

9 a.m. to 12 m.
Field exercise according to assignment.

1 p.m. **The Prenatal Period.**
Dr. W. P. Lucas, Professor of Pediatrics, University of California Medical School, San Francisco.

2 p.m. **Organization of Health Centers.**
Miss Ednah M. Shuey, Director, Berkeley Dispensary and Health Center, Berkeley.

3 p.m. **Epidemiology of Encephalitis.**
Captain Elmer S. Tenney, M.C., U.S.A., San Francisco.

4 p.m. **Health Laws and Regulations.**
Dr. A. F. Gillihan.

**Saturday, July 29.**

Entire day to be devoted to a visit to Arroyo Sanitarium, under direction of Dr. Chesley Bush.

**Monday, July 31.**

9 a.m. to 12 m.
Field exercise according to assignment.

1 p.m. **Rehabilitation of the Discharged Tuberculosis Patient.**
Dr. Haven Emerson.

2 p.m. **Industrial Nursing.**
Miss Margaret Kyne, Public Health Nurse, Market Street Railway Company, San Francisco.

3 p.m. **Tuberculosis and the Family Problem.**
Miss Ida May Theile, Field Worker, Bureau of Tuberculosis, State Board of Health, Sacramento.

4 p.m. **Diphtheria from the Viewpoint of the Field Worker.**
Dr. Frank L. Kelly, Epidemiologist, State Board of Health, San Francisco.

**Tuesday, August 1.**

9 a.m. to 12 m.
Field exercise according to assignment.

1 p.m. **Periodic Medical Examinations.**
Dr. Haven Emerson.

2 p.m. **The Predelinquent State.**
Dr. Jau Don Ball, Lecturer in Criminology and Psychiatry, in the Summer Session, University of California, Berkeley.

3 p.m. **Etiology and Pathology of Typhoid Fever, Paratyphoid Fever, and Bacillary Dysentery.**
Dr. Karl F. Meyer, Acting Director, Hooper Foundation, for Medical Research, San Francisco.

4 p.m. **Practical Application of the Schick Test and the Value of Toxin-antitoxin Administration.**
Dr. E. C. Fleischner, Clinical Professor of Pediatrics, University of California Medical School, San Francisco.

**Wednesday, August 2.**

9 a.m. to 12 m.
Field exercise according to assignment.
1 p.m. **School Hygiene.**
Dr. W. P. Lucas.
2 p.m. **School Nursing.**
Dr. W. P. Lucas.
3 p.m. **The Epidemiology of Typhoid Fever and Dysentery.**
Dr. Frank L. Kelly.
4 p.m. **Present Day Principles for the Use of Antitoxin.**
Dr. E. C. Fleischner.

**Thursday, August 3.**

9 a.m. to 12 m.
Field exercise according to assignment.
1 p.m. **Infant and Preschool Age Period with Special Reference to Health Centers.**
Dr. Adelaide Brown, Member State Board of Health, Lecturer in Medicine (Child Hygiene) Leland Stanford Jr. Medical School, San Francisco.
2 p.m. **Mental Hygiene.**
Dr. V. H. Podstata, Assistant Clinical Professor of Psychiatry, University of California Medical School, San Francisco.
3 p.m. **The Relation of Unofficial Agencies to the Official Agencies.**
Dr. Alvin Powell, Director, Alameda County Health Center, Oakland.
4 p.m. **Diphtheria Regulations in California.**
Dr. W. H. Kellogg.

**Friday, August 4.**

10 a.m. to 12 m.
Round Table on Communicable Diseases.
Dr. Emerson, Dr. Force, Dr. Kelly, Dr. Kellogg, Dr. Gillihan.
1 p.m. to 3 p.m.
Round Table on Child Hygiene.
Dr. W. P. Lucas, Dr. Ellen Stadtmuller.
3 p.m. **State Health Organization.**
Dr. W. M. Dickie, Secretary, State Board of Health, Sacramento.
4 p.m. **Child Hygiene from the Public Health Standpoint.**
Dr. Ellen Stadtmuller, Director, Bureau of Child Hygiene, State Board of Health, San Francisco.

### Lower Municipal Infant Mortality Rate.

The American Child Hygiene Association reports a remarkable decrease in the infant mortality rate throughout the country during 1921. The statistical report just issued by the association covers all cities of over 10,000 population in the United States included in the death registration area. The average rate for all the cities in the area in 1920 was 91.5. The rate for the same cities in 1921 was 77.9, a remarkable reduction.

### Real Wealth Not Money.

Sir Arthur Newsholm, for many years England's chief medical officer of health, says that "the real wealth of the nation does not consist in its money, in the value of its trade or in the extent of its dominion. These are only valuable in so far as they help to maintain a population—and not only a part of it—of the right quality; men, women and children possessing bodily vigor, alert mind, firm character, courage and self-control."

### Leprosy on the Increase.

Morbidity statistics compiled by the United States Public Health Service, upon data supplied by the various states, show that there are 1200 lepers at large in 25 states. The service announces that leprosy is on the increase in the United States and that these lepers at large are a constant danger in the transmission of the disease to others. Dr. C. H. Lavinder of the United States Public Health Service says:

"While remarkable results are being obtained in combating leprosy in other countries it is on the increase in the United States. In the tropics, notably in Hawaii, lepers are being cured by the use of chaulmoogra oil, one of the new discoveries. But we have had no success with it here owing to the difference in the blood consistency of this climate and of this race. Great Britain long ago decided that the only way to eradicate the disease was to segregate the sufferers, so that there could be no chance for it to be communicated to others. We have adopted such a policy in America, and have built a leprosarium at Carrville, Louisiana. It has room for only 200 patients, and now every available bed is occupied. Each day the government receives applications from lepers seeking admission to the hospital. We pay their transportation and give them the very best of care and attention. But we are compelled to inform health officers who come to us that there is no room. As it is next to impossible for each city to construct its own leprosarium, the sufferers are at large, and each day someone comes into contact with them, adding to the possibilities of the disease being communicated to others."

### Health Days Coming.

The National Health Council is sponsoring a movement for the national celebration of three health days in December. The first of these, a Friday, will be devoted to child health; the following day will be used for arousing interest in periodic physical examinations and the last day will be a Health Sunday when public and personal health will be discussed in churches throughout the country.

## MORBIDITY.

### Smallpox.

Thirty-four cases of smallpox were reported last week, the distribution being as follows: San Jose 5, Glendale 19, Placer County 1, Shasta County 1, Livermore 2, Fresno County 1, Modesto 3, Alameda County 1, Los Angeles 1.

### Typhoid Fever.

Seventeen cases of typhoid fever were reported last week, two cases from Kern County and one each from the following localities: Ventura County, Oakland, Santa Ana, San Joaquin County, Richmond, Berkeley, Sacramento, Los Angeles County, Fresno County, Chino, Mendocino County, Riverside, Santa Paula, Sacramento County, Kings County.

### Cerebrospinal Meningitis.

Two cases of epidemic cerebrospinal meningitis were reported last week, one being from San Francisco and one from Monterey County.

### Epidemic Encephalitis.

San Francisco reported three cases of this disease last week and Monterey reported one case.

### Leprosy.

San Francisco reported one case of leprosy last week.

### Infectious Jaundice.

One case of this disease was reported from Berkeley last week.

### Rabies.

Los Angeles reported last week one case of rabies in a child six years of age.

## LIST OF DISEASES REPORTABLE BY LAW.

- ANTHRAX
- BERI-BERI
- BOTULISM
- CEREBROSPINAL MENINGITIS (Epidemic)
- CHICKENPOX
- CHOLERA, ASIATIC
- DENGUE
- DIPHTHERIA
- DYSENTERY
- ENCEPHALITIS (Epidemic)
- ERYSIPELAS
- FLUKES
- FOOD POISONING
- GERMAN MEASLES
- GLANDERS
- GONOCOCCUS INFECTION*
- HOOKWORM
- INFLUENZA
- INFECTIOUS JAUNDICE
- LEPROSY
- MALARIA
- MEASLES
- MUMPS
- OPHTHALMIA NEONATORUM
- PARATYPHOID FEVER
- PELLAGRA
- PLAGUE
- PNEUMONIA
- POLIOMYELITIS
- RABIES
- ROCKY MOUNTAIN SPOTTED (or Tick) FEVER
- SCARLET FEVER
- SMALLPOX
- SYPHILIS*
- TETANUS
- TRACHOMA
- TUBERCULOSIS
- TYPHOID FEVER
- TYPHUS FEVER
- WHOOPING COUGH
- YELLOW FEVER

*Reported by office number. Name and address not required.

## QUARANTINABLE DISEASES.

- CEREBROSPINAL MENINGITIS (Epidemic)
- CHOLERA, ASIATIC
- DIPHTHERIA
- ENCEPHALITIS (Epidemic)
- LEPROSY
- PLAGUE
- POLIOMYELITIS
- SCARLET FEVER
- SMALLPOX
- TYPHOID FEVER
- TYPHUS FEVER
- YELLOW FEVER

## COMMUNICABLE DISEASE REPORT.

| Disease | 1922 | | | | 1921 | | | |
|---|---|---|---|---|---|---|---|---|
| | Week ending | | | Reports for week ending July 8 received by July 11 | Week ending | | | Reports for week ending July 9 received by July 13 |
| | June 17 | June 24 | July 1 | | June 18 | June 25 | July 2 | |
| Anthrax | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Cerebrospinal Meningitis | 3 | 3 | 2 | 2 | 3 | 2 | 6 | 3 |
| Chickenpox | 147 | 133 | 81 | 46 | 132 | 105 | 95 | 59 |
| Diphtheria | 160 | 150 | 153 | 88 | 126 | 109 | 105 | 96 |
| Dysentery (Bacillary) | 14 | 3 | 4 | 6 | 0 | 1 | 8 | 1 |
| Epidemic Encephalitis | 2 | 1 | 3 | 4 | 2 | 0 | 2 | 0 |
| Gonorrhoea | 71 | 79 | 58 | 102 | 51 | 60 | 56 | 70 |
| Infectious Jaundice | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 |
| Influenza | 6 | 3 | 7 | 5 | 27 | 10 | 14 | 4 |
| Leprosy | 0 | 0 | 1 | 1 | 0 | 0 | 3 | 1 |
| Malaria | 1 | 3 | 1 | 1 | 5 | 9 | 7 | 3 |
| Measles | 25 | 49 | 20 | 12 | 265 | 197 | 169 | 87 |
| Mumps | 56 | 60 | 18 | 15 | 124 | 40 | 69 | 37 |
| Pneumonia | 56 | 56 | 53 | 72 | 39 | 40 | 33 | 30 |
| Poliomyelitis | 2 | 1 | 5 | 0 | 2 | 5 | 2 | 3 |
| Rabies | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 |
| Scarlet Fever | 90 | 90 | 67 | 40 | 71 | 91 | 66 | 53 |
| Smallpox | 62 | 26 | 23 | 34 | 76 | 74 | 69 | 56 |
| Syphilis | 72 | 97 | 68 | 78 | 43 | 78 | 46 | 67 |
| Tuberculosis | 142 | 224 | 135 | 223 | 162 | 101 | 168 | 93 |
| Typhoid Fever | 27 | 23 | 20 | 17 | 19 | 20 | 23 | 20 |
| Whooping Cough | 114 | 117 | 93 | 100 | 80 | 78 | 58 | 52 |
| | 1050 | 1118 | 812 | 848 | 1227 | 1020 | 1000 | 735 |

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